

MC PAT REV

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input checked="" type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please, charge the Publication Fee to  
Account Number 01-0493. (no pub Fee Stamp)  
Please, Resolve.  
Thank you.  
A

[XRUSH] RESPONSE: Corrected

INITIALS: RB

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
REV 10/04